DATENT	ADDLI	CATION	FEE DETER	IACITA IAIRA	DECARD
PAIENI	APPLI	CAHUN	FEE DETER	MINATION	RECURD

Effective October 1, 2000

Application or Docket Number

10010445-1

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE OR		OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS		14				RATE	FEE		RATE	FEE		
FOR		NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			A minus 20=				X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			9 m	minus 3 = *			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT						+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	TOTAL		OR	TOTAL	710	
CLAIMS AS AMENDED - PART II							11			OTHER	THAN	
		(Column 1)		(Colui		(Column 3)	SMALL	NTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9=	:	OR	X\$18=		
	Independent	*	Minus	***		=	X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	CLAIM		+135=		OR	+270=		
							TOTAL			TOTAL		
		(Column 1)		(Colu	mn 2)	(Column 3)	ADDIT. FEE		JOI1,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=	:	
AME	Independent		Minus	***	5 01 4114	=	X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	CLAIM		+135=		OR	+270=		
							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total .	*	Minus	**		=	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=	X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL									<u> </u>		
	If the entry in colu	mn 1 is less than t	he entry in co	lumn 2 writ	e "0" in cc	olumn 3	+135=		OR	+270=	<u> </u>	
••	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											